

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51	/					
2	X	/					52		/				
3		/					53		/				
4		/					54		/				
5		/					55		/				
6		/					56		/				
7		/					57	/					
8		/					58		/				
9		/					59		/				
10		/					60	/					
11		/					61		/				
12	/	/					62		/				
13		/					63		/				
14		/					64		/				
15		/					65		/				
16		/					66		/				
17		/					67	/	/				
18	/	/					68	/	/				
19		/					69	/	/				
20		/					70	/	/				
21		/					71	/	/				
22		/					72	/	/				
23		/					73	/	/				
24	/	/					74	/	/				
25		/					75	/	/				
26		/					76	/	/				
27	/	/					77	/	/				
28		/					78	/	/				
29		/					79						
30		/					80						
31		/					81						
32		/					82						
33		/					83						
34	/	/					84						
35		/					85						
36		/					86						
37		/					87						
38		/					88						
39		/					89						
40		/					90						
41		/					91						
42		/					92						
43		/					93						
44		/					94						
45	/	/					95						
46		/					96						
47		/					97						
48		/					98						
49		/					99						
50		/					100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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